Aaron D. Lindsey

D5265

PTO/SB/01 (10-01)
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DECLARATION FOR UTILITY OR

DESIGN

Att rn y Dock t Numb r

First Nam d Inventor

PATENT APP	COMPL	COMPLETE IF KNOWN		
(37 CFR	1.63)	Application Number		/
X Declaration	Declaration	Filing Date		
Submitted OR with Initial	Submitted after Initial Filing (surcharge	Art Unit		
Filing	(37 ČFR 1.16 (e)) required)	Examiner Name		
As the below named inventor, I h	ereby declare that:			
My residence, mailing address, and	f citizenship are as stated belo	w next to my name.		
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:				
Driver/Entry Ventilation System For A Bus				
(Title of the Invention) the specification of which				
 ਵਾਲੇ				
is attached hereto				
OR				
was filed on (MM/DD/YYYY)		as United States Ap	oplication Numbe	r or PCT International
L				
Application Number	and was amended	I on (MM/DD/YYYY)		
<u></u>		[[[[[[[[[[[[[[[[[[[(if applicable).
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.				
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is				
Prior Foreign Application		Foreign Filing Date	Priority	
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	Certified Copy Attached? YES NO
Additional foreign application				
Additional foreign application nun	npers are listed on a suppleme	ental priority data sheet PT	O/SB/02B attach	and horsets:

Please type a pli	s sign (+) inside this box	 ▶	+

PTO/SB/81 (10-00)
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Aaron D. Lindsey
Group Art Unit	
Examiner Name	
Attorney Docket Number	D5265

Practitioners at Customer Number OR Practitioner(s) named below: Practitioner(s) named below:	I hereby appoint:				
Dennis K. Sullivan Jeffrey P. Calfa 37,105 Neil T. Powell Susan L. Lukasik as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address Address Address Address I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Aaron D. Lindsey Signature Date Onto: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	OR	<u> </u>	Lago betto		
Jeffrey P. Calfa 37,105 Neil T. Powell 45,020 Susan L. Lukasik 35,261	D				
Neil T. Powell Susan L. Lukasik 35,261 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address Address City Country Telephone Fax I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Aaron D. Lindsey Signature Date 7//5/03 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	Dennis K. Sullivan 26,510				
Susan L. Lukasik as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). SIGNATURE of Applicant or Assignee of Record Name Aaron D. Lindsey Signature Date 7/15/03 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
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Name Aaron D. Lindsey Signature Date 7/15/03 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.				
Name Aaron D. Lindsey Signature Date 7/15/03 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	SIGNATURE of Applicant or Assignee of Record				
Date 7/15/63 NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Name				
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M	NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	Aaron D. Lindsey
Group Art Unit	
Examiner Name	
Attorney Docket Number	D5265

I hereby appoint: X Practitioners at Customer Number 30410				
Name Dennis K. Sullivan Jeffrey P. Calfa Neil T. Powell Susan L. Lukasik as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address				
Jeffrey P. Calfa Neil T. Powell Susan L. Lukasik 35,261 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Individual Name Address				
Neil T. Powell Susan L. Lukasik 35,261 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Individual Name Address				
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The above-mentioned Customer Number. OR Firm or Individual Name Address				
Firm or Individual Name Address				
Address Address				
Address				
City State Zip				
Country				
Telephone Fax				
I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
SIGNATURE of Applicant or Assignee of Record				
Name Kenneth J. Smith				
Signature (Culture)				
Date 7-15-03				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
*Total of 2 forms are submitted.				

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below					
Jeffrey P. Calfa, International	304 Truck⊧ Intellactu	10 வகுழைerty Company, LL	С		
Address 4201 Winfield Road, P.O. Box	c 1488				
City Warrenville State Illinois ZIP 60555					
Country USA Telephone 630-753-3023 Fax 630-753-3982					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any]) Aaron D. Family Name or Surname					
Inventor's Signature Para D (moda) Date 7/15/03					
Residence: City Bryant	IN	United States	United States		
Mailing Address 4625E 900N					
City	State	47326 ZIP	United States Country		
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor					
Given Name Kenneth J. Family Name Smith or Surname					
Inventor's Signature Count Date 7-15-03					
Yoder Residence: City	IN State	United States Country	United States Citizenship		
2906 E. 1200 N. Mailing Address					
Yoder	IN State	46798 ZIP	United States Country		
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

Aaron D. Lindsey

D5265

COMPLETE IF KNOWN

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DECLARATION FOR UTILITY OR

DESIGN PATENT APPLICATION

(37 CFR 1.63)

Attorney D ck t Number

First Named Inventor

Application Numb r

X Declaration	Declaration	Filing Date		
Submitted OR with Initial	Submitted after Initial Filing (surcharge	Art Unit		
Filing	(37 CFR 1.16 (e)) required)	Examiner Name		
As the below named inventor, I he	reby declare that:			· · · · · · · · · · · · · · · · · · ·
My residence, mailing address, and	citizenship are as stated below	w next to my name.		
I believe I am the original and first in	ventor of the subject matter w	hich is claimed and for wh	ich a patent is sou	ight on the invention entitled:
Driver/Entry Ventilation S	ystem For A Bus			
		•		
	•			
				# w
the specification of which	(Title of the In	vention)	· · · · · · · · · · · · · · · · · · ·	
<u></u>				
is attached hereto				
OR				
was filed on (MM/DD/YYYY)		as United States A	pplication Number	or PCT International
Application Number	and was amended	d on (MM/DD/YYYY)		(if applicable).
		<u> </u>	· · · · · · · · · · · · · · · · · · ·	
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.				
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breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is				
claimed. Prior Foreign Application		Foreign Filing Date	Priority	
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	Certified Copy Attached? YES NO
,				
,				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:				
[Page 1 of 2]				

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.